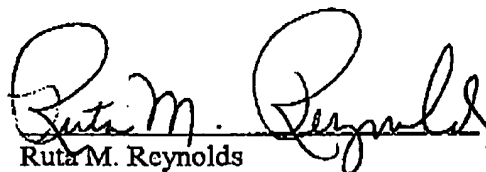


OCT 16 2006

CERTIFICATE OF FACSIMILE TRANSMISSION
UNDER 37 CFR §1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted on the date indicated below via facsimile to the United States Patent and Trademark Office, facsimile number (571)-273-8300.

Date: October 16, 2006


Ruta M. Reynolds

In Re Application Of:

Art Unit: 2611

Ramachandran, et al.

Serial No.: 10/696,626

Confirmation No.: 5553


Filed: October 29, 2003

Skyworks Docket No. 3SKY0003
TKHR Docket No. 051933-1110

For: Multi-Mode Receiver

TOTAL PAGES (including cover sheet) 20

OCT 16 2006

AMENDMENT TRANSMITTAL LETTER (LARGE)				Docket No. 3SKY0003	
Applicant(s): Ramachandran, et al.					
Serial No. 10/696,626	Filing Date October 29, 2003	Examiner Wong, Linda	Confirmation No. 5553	Group Art Unit 5553	
Invention: Multi-Mode Receiver					
Commissioner for Patents Mail Stop - Amendment P.O. Box 1450 Alexandria VA 22313-1450					
Transmitted herewith is Response With Amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	33 -	33 =	0	X \$50.00	\$
INDEP. CLAIMS	4 -	4 =	0	X \$200.00	\$
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$
EXTENSION FEE	1ST MONTH <input type="checkbox"/> \$120.00	2ND MONTH <input type="checkbox"/> \$450.00	3RD MONTH <input type="checkbox"/> \$1,020.00	4TH MONTH <input type="checkbox"/> \$1,590.00	\$
Other Fees:					\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$
<input checked="" type="checkbox"/> No additional fee is required. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this page is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.					
 _____ David Rodack, Registration No. 47,034				_____ 10-16-06 Date	

OCT 16 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Ramachandran, et al.Serial No.: **10/696,626**Filed: **October 29, 2003**Confirmation No.: **5553**Group Art Unit: **2611**Examiner: **Wong, Linda**Skyworks Docket No. **3SKY0003**TKHR Docket No. **051933-1110**For: **Multi-Mode Receiver****RESPONSE WITH AMENDMENT**

Mail Stop - Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

The non-final Office Action mailed July 14, 2006 (Part of Paper No./Mail Date 20060704) has been carefully considered. In response thereto, please enter the following amendments and consider the following remarks.

AUTHORIZATION TO DEBIT ACCOUNT

It is not believed that extensions of time or fees for net addition of claims are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to deposit account no. 20-0778.